

2012 Application/Enrollment Form

OFFICAIL USE ONL	Υ								
Swim Time:	Under water:	PASS	FAIL	Tread \	Nater:	PASS	FAIL	Instructors Initials:	
Last Name , First Name									
Sex: Male I	Female	D.O.B.:			Age first day of session:				
Health Concerns? Yes No If yes, please explain:									
Mother's/Guardian Name:			Fath	Father/Guardian Name:					
Phone	Home:						Home:		
	Work: Cell:		Pho	Phone		Work:			
						Cell:			
Address:									
City:		State	State:		Zip:				
Email Address:				-			-		
Emergency Contact Information									
Name:		Relationship:		:		Phone:			
Doctors Name:			Phone:						

Tuition

Session (circle one)	June 18 th -July 13 th (4 weeks) Cost: \$300		June 25 th - July 13 th (3 weeks) Cost: \$225
CAPTAIN	YES		NO
Total amount of Tuition (can be family total)		1. TUITION	
Total amount of discount * (if any)	2. DISCOUNT		
Subtract line 2 from line 1 and enter her	3. SUB-TOTAL		
Total amount of additional uniform pure	4. UNIFORM Total		
Sum of line 3 and 4		5. TOTAL	

^{*}Ask about family discounts given to JG's residing in the same household.

^{*} Financial Aid is available for those that qualify. See Parent Handbook for additional information.

^{*} Additional uniform items are available for purchase. See Uniform Order Form for list of items and prices.



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Last Name	, First Name

Uniforms are a requirement of the program and must be worn at all times. Uniform items that are included in the cost of the program consist of a Junior Lifeguard t-shirt, navy blue swim trunks, rash guard and cap. Girls are required to wear a solid navy blue one piece swim suit that is appropriate in appearance. Any additional uniform items are available for purchase with the use of this form.

UNIFORM ITEMS INCLUDES IN PROGRAM COST (please circle appropriate size)

T-Shirt (yellow with IBJG logo)	YOUTH: M L XL	ADULT: S M L XL
Rashguard (yellow with IBJG logo)	YOUTH: L XL	ADULT: S M L XL
Boardshorts (solid navy blue)	GIRLS: 1 3 5 7 9 11 13	BOYS: 24 26 28 30 32 34 36
Cap (with IBJG logo)	S/M	L/XL

ADDITIONAL IBJG UNIFORM ITEMS FOR PURCHASE (optional)

ITEM	SIZE	SIZE	QTY	COST	Total		
T-Shirt	YOUTH: M L XL	ADULT: S M L XL		\$10			
Rashguard	YOUTH: L XL	ADULT: S M L XL		\$25			
Boardshorts	GIRLS: 1 3 5 7 9 11 13	BOYS: 24 26 28 30 32 34 36		\$25			
Sweatpants	YOUTH: L XL	ADULT: S M L XL		\$25			
Sweatshirt	YOUTH: S M L XL	ADULT: M L XL		\$25			
Сар	S/M	L/XL		\$20			
TOTAL							
****** Add the total amount from this page to line 4 on the Application/Enrollment form *******							



2012 Enrollment Form

Imperial Beach Junior Lifeguard Program

Parent Handbook Acknowledgement, Release of Liability, Authorization to Treat a Minor, and Video-Photo Release Form

(Page 1 of 2)

Imperial Beach Junior Lifeguard Release of Liability

I agree to assume all risks and hold harmless from any liability and any claim, including negligence and carelessness, the City of Imperial Beach ("City"), San Diego Unified Port District ("Port"), Imperial Beach Junior Lifequard Program, all other City or Port agencies and any of their agents, servants, volunteers, or employees, by reason of any accident, death, injury, or any damages to persons or property which I or my child may incur while participating in any transportation provided by and activity sponsored by the Imperial Beach Junior Lifeguard Program. I further understand that serious accidents or death can occur during aquatic and marine activities; and that participants in aquatic and marine activities occasionally sustain mortal or serious personal injuries, and/or property damage, as a consequence thereof. Knowing the risk of aquatic and marine activities (swimming, surfing, lifesaving, canoeing, body surfing, body boarding, competition, and the like), nevertheless, I hereby agree to assume on my behalf and on behalf of my child those risks and to release and hold harmless all of the persons or entities mentioned above who might otherwise be liable to me, my child, my heirs or assigns, or my child's heirs or assigns for damages. It is further understood and agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns, and the heirs and assigns of my child. I also agree to pay all costs incident to any such claim including, without limitation, attorney's fees, and agree to assume responsibility for any property damage or injury to any person caused by me or my child while participating in any activity sponsored by the Imperial Beach Junior Lifeguard Program.

Authorization to Treat a Minor

I, the parent or legal guardian of the child listed, do hereby authorize and consent to any X-ray examination, anesthetic, medical or surgical treatment, medical examination, and/or diagnosis rendered under the general or special supervision of any member of the medical staff and emergency room staff licensed under the provisions of the Medical Practice Act or a Dentist under the provisions of the Dental Practice Act and on the staff of any acute general hospital or emergency care facility holding a current license to operate a hospital or emergency care facility from the State of California Department of Public Health. I understand that this authorization is given in advance of any specific diagnosis, treatment or hospital care being required, but is given to provide authority and power to render care which the aforementioned physician, in the exercise of his/her best judgment, may be advisable for my child. Further I understand that my child will be participating in inherently dangerous activities i.e. (swimming, running, surfing, sailing, canoeing, boogie boarding, competitions, and the like) and agree to pay for my child's medical expenses. I understand that every effort shall be made to contact me prior to rendering treatment to my child, but any of the above treatment will not be withheld if I cannot be reached. This authorization is given pursuant to the provisions of the California Civil Code and Family Code. This consent shall remain in effect until December 1, of the subject year. Furthermore, I have listed all medical conditions and/or concerns in the Emergency Contact and Medical History section of the Application.



2012 Enrollment Form

Date

Imperial Beach Junior Lifequard Program

Parent Handbook Acknowledgement, Release of Liability, Authorization to Treat a Minor, and Video-Photo Release Form (Page 2 of 2)

Video-Photo Release

I understand that during the Junior Lifeguard Program or related activities, my photograph and/or the photograph of my child may be taken by the Junior Lifeguard Program, producers, sponsors, organizer, and/or assigns. I agree that my photograph and/or the photograph of my child, including video photography, film photography, or other reproduction of my likeness or the likeness of my child, may be used without charge by the City of Imperial Beach, its producers, sponsors, organizers and/or its assigns for educational, promotional, and/or other necessary purposes.

Please Initial and Sign Below: _I have read, understand and approve the RELEASE FROM LIABILITY and the VIDEO-PHOTO RELEASE. I have read, understand and approve the AUTHORIZATION TO TREAT A MINOR with any restrictions, all medical conditions, and/or concerns that I have listed in the Emergency **Contact and Medical History section of the Application.** I understand neither I nor my child can participate in any program activities until all fees have been paid in full. I understand that if I do not initial to approve the RELEASE FROM LIABILITY and the AUTHORIZATION TO TREAT A MINOR and if I refuse to sign this document, the Junior Lifeguard Program will not be able to process my or my child's application. I hereby declare under penalty of perjury that I am the parent or legal guardian and have read. understood and approve the RELEASE FROM LIABILITY, AUTHORIZATION TO TREAT A MINOR, AND VIDEO-PHOTO RELEASE, and that I have read and reviewed the Parent Handbook (downloadable from the website or available at the Lifequard Headquarters) with the applicant and we understand and agree to the Terms of Enrollment, Uniform Policy, IBJG Code of Conduct Orders, Discipline Policy, Refund Policy, and the Payment Policy (found in the Parent Handbook). As the parent/guardian of the applicant listed below, I guarantee that the information in the application accompanying this Form is accurate and true to the best of my knowledge. Name of Applicant (one applicant per Form) Applicant's Date of Birth Parent and/or Guardian (Printed Name) Parent and/or Guardian Signature